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200

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Opinion

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I quit my aged care job when I could no longer give residents the life they deserve

Anonymous

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recently quit working in aged care. I am a registered nurse with a master's degree and many years of experience. I quit because aged care is broken. I managed a 120-bed not-for-profit home. The neglect of the aged care system by government, the chronic

I underfunding, chronic staff shortages, the ridiculous compliance system and family expectations make it impossible. Covid-19 is the straw that broke the camel's back.

The modern philosophy of aged care is to create a home-like environment, provide activities and opportunities for residents to live the life they choose and for care to be individualised and best-practice. Our older people deserve this level of care and the opportunity to make friends, sing, dance, laugh, knit or visit the pub, even if they live in a nursing home. This is the expectation of the aged care quality standards and also of families and the people who work in nursing homes.

The reality varies and is often very different. The level of funding makes this ideal almost impossible to achieve. Staffing makes up over 65% of the cost of running a home so cutting staffing is often the only way for organisations to stay afloat. The organisation I worked for has undertaken roster changes on an almost annual basis for the past 10 years, resulting in decreases in personal care staff, cleaners, hospitality and nursing levels.

“ Covid-19 is the straw that broke the camel's back
Former aged-care worker

Care staff try their hardest but are low-paid, lack sufficient training and have to work under unreasonable expectations from management, residents and families. There are good nurses working in aged care, but with each resident requiring over 15 separate care plans, every incident requiring extensive follow-up and navigating through very complex care needs they are overworked, and there is a chronic shortage.

Three care staff for 30 residents on a morning shift is not uncommon. This can happen due to chronic shortage of staff. Resident care suffers, not because the staff are lazy or don't try, just because the job is too big. I kept reminding staff to stay away if they are unwell and to be tested for Covid-19. Many of them plead to be paid out their annual leave because they can't afford to be away for four or five days waiting for results.

If the staff don't document correctly we are at risk of losing funding. If nurses miss charting one massage or one blood pressure or blood sugar we can lose funding and also face a “not met” in our accreditation. We started care plans on one of our new residents six days too early and so missed out on claiming \$50 per day. This adds up when money is already tight. The maximum funding we can achieve is \$220 per resident per day, the cost of a night in a nice hotel, but we are expected to provide 24/7 care, meals, laundry, lifestyle activities and meet onerous compliance requirements.

The government tells the public they are supporting aged care but the announced \$800 bonus for frontline workers has still not been paid. The bonus is only for nurses and personal carers and does not apply to my overworked cleaners, or my receptionist who is abused by families every day for policing our infection control visitor restrictions.

We received no extra resources or staffing to manage visitor restrictions. We received no PPE to help keep staff and residents safe. We have had phone calls from the Aged Care Quality and Safety Commission to complete a phone survey, taking an hour of our time. The commonwealth-run Primary Health Network also called asking us to answer questions about our response to Covid-19. They don't offer help, just more compliance and more rules to follow with no extra resources.

I am leaving the sector because I no longer feel I can give residents the life they deserve. Blaming aged care homes or the staff is not helpful. [Aged care](#) was on the brink of crisis before Covid-19 and now we are seeing the tipping point of workforce problems, gross underfunding and a government that does not listen or seem to care.

The author of this article is a registered nurse who recently quit working in aged care

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